## IN THE UPPER ARLINGTON MAYOR'S COURT UPPER ARLINGTON, OHIO

In the matter of: Name: Case Number: Alias/Maiden:\_\_\_\_\_ Date of Birth:\_\_\_\_ Address:\_\_\_\_ State/Zip: Phone No.: APPLICATION FOR EXPUNGEMENT AND SEALING OF THE RECORD Now comes applies to the court for expungement and sealing of all official records of CONVICTION in Case No .\_\_\_\_\_ Upper Arlington Mayor's Court, Upper Arlington, Ohio, as provided in section 2953.32 of the Ohio Revised Code. The nature of the offense was \_\_\_\_\_ and the date of conviction was Applicant Signature If represented by an attorney, attorney sign below: Attorney Name: Supreme Court # Attorney Address: Phone Number: \_\_\_\_\_ **MEMORANDUM** The applicant qualifies as an "ELIGIBLE OFFENDER" as defined in section 2953.31(A), O.R.C. and the applicant meets all of the requirements, as provided in section 2953.32 of the Ohio Revised Code. The applicant deposits herewith the sum of fifty dollars (\$50.00), as provided in section 2953.32(C3) or submits an affidavit of indigency as provided in section 1901.26(B). Applicant or Attorney Signature hereby attest that I meet the definition of "Eligible Offender" as stated in Ohio Revised Code 2953.31(A). I further understand that falsifying this information may result in a criminal offense being filed and vacation of any expungement granted under this application. Applicant Sworn to and subscribed before me this day of , 20 . By: Notary Public PROOF OF SERVICE I hereby certify that a copy of the within application was served upon the Upper Arlington City Prosecutor, this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_\_. Clerk/Deputy Clerk of Court

Mail completed application to "The Upper Arlington Clerk of Court's Office" 3600 Tremont Road, Upper Arlington, Ohio 43221